

**FAX TRANSMISSION****DATE:** February 27, 2008**PTO IDENTIFIER:** Application Number 10/516,948-Conf. #4972
Patent Number**Inventor:** Takashi Yamamoto et al.**MESSAGE TO:** Office of Patent Publication**FAX NUMBER:** (571) 273-2885**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

William L. Brooks

PHONE: (202) 478-7370**Attorney Dkt. #:** 80408(303227)**PAGES (Including Cover Sheet):** 7**CONTENTS:** Transmittal Form (1 page)
Fee Transmittal (1 page)
Part B - Fee(s) Transmittal (2 pages)
Change of Correspondence Address (1 page)
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PTO/SB/21 (10-07)
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/516,948-Conf. #4972
	Filing Date	December 16, 2004
	First Named Inventor	Takashi Yamamoto
	Art Unit	3634
	Examiner Name	S. L. Purol
Total Number of Pages in This Submission	Attorney Docket Number	80408(303227)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Part B - Fee(s) Transmittal
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	William L. Brooks		
Date	February 27, 2008	Reg. No.	34,129

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PTO/SB/17 (10-07)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).

FEE TRANSMITTAL For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,746.00

Complete if Known

Application Number	10/516,948-Conf. #4972
Filing Date	December 16, 2004
First Named Inventor	Takashi Yamamoto
Examiner Name	S. L. Puroi
Art Unit	3634
Attorney Docket No.	80408(303227)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims Extra Claims Fee (\$)
 - 20 = _____ x _____ = _____
 HP = highest number of total claims paid for, if greater than 20.
 Indep. Claims Extra Claims Fee (\$)
 - 3 = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)
 - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____
 Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
 Other (e.g., late filing surcharge):
 1501 Utility issue fee 1,440.00
 1504 Publication fee for early, voluntary, or normal ... 300.00
 8001 Printed copy of patent w/o color 6.00

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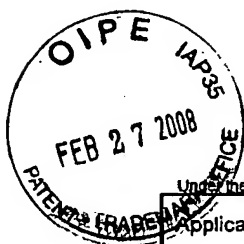
Signature	<i>William L. Brooks</i>	Registration No. (Attorney/Agent)	34,129	Telephone	(202) 478-7370
Name (Print/Type)	William L. Brooks	Date	February 27, 2008		

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PTO/SB/97 (09-04)

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Application No. (if known): 10/516,948

Attorney Docket No.: 80408(303227)

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